


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 DEC -2 AM 11:38

DOCUMENT # **L04000084554**

1. Limited Liability Company's Name
K&G Realty Holding Co. LLC

CR2E041 (12/07)

2. Principal Office Address - No P.O. Box # 1261 Gulf Blvd		3. Mailing Office Address Same	
Suite, Apt. #, etc. 119		Suite, Apt. #, etc.	
City & State Clearwater		City & State	
Zip FL	Country Pinellas	Zip 33767	Country

4. State/Country of Formation FLORIDA USA	
5. Date Organized or Qualified To Do Business in Florida 11-16-04	
6. FEI Number 562488940	Applied For <input type="checkbox"/> Not Applicable
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent

Name
GIBNEY, Frederick W.

Street Address (P.O. Box Number is Not Acceptable)
2230 Donato Drive

Suite, Apt. #, Etc.

City
Belleair Beach

State
FL

Zip Code
33786

A \$100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$100 reinstatement be waived.

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent **Frederick W. Gibney** Date **11-21-08**

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	Kiser, Jeffrey G	2205 22ND ST	Belleair Bch FL ³³⁷⁸⁶
MGR	Gibney, Frederick W	2230 Donato Dr	Belleair Bch, FL ³³⁷⁸⁶
			700138347947 12/01/08--01077--008 **416.25
REINSTATEMENT 2006-08			

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager **Frederick W. Gibney** Date **11-21-08** Daytime Phone # **727-595-1010**

Typed or printed name of signing Managing Member/Manager _____